

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	AN	45331	
O.I.P.E. CLASSIFIER	N		6-7-9
FORMALITY REVIEW		49652	86/15/99

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here